ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D. B		
O.I.P.E. CLASSIFIER		21	2/3/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			2-17

INDEX OF CLAIMS

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✔  ........................... Rejected        N  ........................... Non-elected
=  ........................... Allowed          I  ........................... Interference
—  (Through numeral)... Canceled          A  ........................... Appeal
÷  ........................... Restricted      O  ........................... Objected
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If more than 150 claims or 10 actions
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